

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Fresenius Medical Care North America PAC

ADDRESS (number and street) ▼

801 Pennsylvania Avenue, NW

Suite 255

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00401299

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
03 01 2012

through

M M M / D D D / Y Y Y Y Y Y
03 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Eric Bishop

Signature of Treasurer

Eric Bishop

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 09 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		12020.24
(b) Cash on Hand at Beginning of Reporting Period.....	6153.01	
(c) Total Receipts (from Line 19)	22607.83	41395.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	28760.84	53415.29
7. Total Disbursements (from Line 31)	1130.01	25784.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27630.83	27630.83
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 03 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y
 03 / 31 / 2012
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

14101.70

27348.34

(ii) Unitemized

3506.13

9046.71

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

17607.83

36395.05

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

17607.83

36395.05

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

5000.00

5000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

22607.83

41395.05

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

22607.83

41395.05

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	130.01	284.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	130.01	284.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	25500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1130.01	25784.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1130.01	25784.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	17607.83	36395.05
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17607.83	36395.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	130.01	284.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	130.01	284.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 21
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Rebecca Wingard

Mailing Address 750 Old Hickory Blvd
Suite 230

City State Zip Code
Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Quality Initiatives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2012

Transaction ID : 6227747

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kathleen Stearns

Mailing Address 26 Hillside Rd

City State Zip Code
Plainville MA 02762-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr. Insurance Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2012

Transaction ID : 6227748

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Lawrence K Park

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451-3185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Health Safety & Risk Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2012

Transaction ID : 6227751

Amount of Each Receipt this Period

850.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Christopher L. Constantine

Mailing Address 10441 S Bridgewater Dr

City State Zip Code
Oak Creek WI 53154-7951

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : 6274605

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Kathryn McDougall

Mailing Address 1010 Whispering Winds Drive

City State Zip Code
Greenbrier TN 37073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director, Quality Initiatives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : 6274607

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Norma Ofsthun

Mailing Address 128 Spring St

City State Zip Code
Lexington MA 02421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Corporate Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : 6274609

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Richard Stotz

Mailing Address One Westbrook

Corporate Center, Suite 1000

City

Westchester

State

IL

Zip Code

60154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : 6274611

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Krista Etter

Mailing Address 2611 Southcoast Hwy 101

Suite 202

City

Cardiff

State

CA

Zip Code

92007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Director/Physician Liason

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : 6274615

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Jill Hall

Mailing Address 5251 DTC Parkway

Suite 500

City

Greenwood Village

State

CO

Zip Code

80111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Quality Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : 6274616

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Curtis Dean Johnson

Mailing Address 525 Sycamore Drive

City State Zip Code
 Milpitas CA 95035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 19 / 2012

Transaction ID : 6274617

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Jason Gish

Mailing Address 920 Winter Street

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Intellectual Property Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 28 / 2012

Transaction ID : 6292417

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Keith Mentz

Mailing Address 250 East Day Road
 Suite 300

City State Zip Code
 Mishawaka IN 46545-3471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP of Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

03 / 28 / 2012

Transaction ID : 6292418

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Carl Groves

Mailing Address 1203 Troy Schenectady Road

City State Zip Code
 Latham NY 12110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 21 / 2012

Transaction ID : 6292423

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Allen Mills

Mailing Address 210 N. Church Street, # 2914

City State Zip Code
 Charlotte NC 28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : 6292426

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Michael F. Turek

Mailing Address One Westbrook Corp Center
 Suite 1000

City State Zip Code
 Westchester IL 60154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice Pres, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 23 / 2012

Transaction ID : 6292429

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Alexis Porras

Mailing Address 32 Hartwell Ave

City

Lexington

State

MA

Zip Code

02421-7810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Clinical Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 20 / 2012

Transaction ID : 6292432

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Douglas G. Kott

Mailing Address 211 Claybook Rd.

City

Dover

State

MA

Zip Code

02030-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.86

Date of Receipt

03 / 31 / 2012

Transaction ID : PR7883583260

Amount of Each Receipt this Period

384.62

P/R Deduction (\$384.62 Monthly)

Full Name (Last, First, Middle Initial)

C. Nicholas Brownlee

Mailing Address 12 Deer Grass Ln

City

Acton

State

MA

Zip Code

01720-4755

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President SRM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.86

Date of Receipt

03 / 31 / 2012

Transaction ID : PR7883653260

Amount of Each Receipt this Period

384.62

P/R Deduction (\$384.62 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1519.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. David Carter

Mailing Address 5215 Wiltonwood Ct

City
Indianapolis

State
IN

Zip Code
46254-9665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

03 / 31 / 2012

Transaction ID : PR7883673260

Amount of Each Receipt this Period

130.00

P/R Deduction (\$130.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Claire Callahan

Mailing Address 920 Winter St

City
Waltham

State
MA

Zip Code
02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP Human Resources & Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

03 / 31 / 2012

Transaction ID : PR7883703260

Amount of Each Receipt this Period

330.00

P/R Deduction (\$330.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Robert P. Loeper

Mailing Address 10431 Oakbrook Dr

City
Tampa

State
FL

Zip Code
33618-5352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2012

Transaction ID : PR7883753260

Amount of Each Receipt this Period

76.92

P/R Deduction (\$76.92 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

536.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Robert McGorty

Mailing Address 2 Walter Circle

City

Westford

State

MA

Zip Code

01886-4533

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance & Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.28

Date of Receipt

03 / 31 / 2012

Transaction ID : PR7883773260

Amount of Each Receipt this Period

230.76

P/R Deduction (\$230.76 Monthly)

Full Name (Last, First, Middle Initial)

B. Terry O Gilpin

Mailing Address 4631 Woodland Corporate Blvd Suite
Suite 113

City

Tampa

State

FL

Zip Code

33614-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President DSD North Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

03 / 31 / 2012

Transaction ID : PR7883953260

Amount of Each Receipt this Period

153.84

P/R Deduction (\$153.84 Monthly)

Full Name (Last, First, Middle Initial)

C. Erma Hall

Mailing Address 3850 N Causeway

City

Metairie

State

LA

Zip Code

70002-4719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

03 / 31 / 2012

Transaction ID : PR7883963260

Amount of Each Receipt this Period

76.00

P/R Deduction (\$76.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

460.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 21
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Deborah Harvey

Mailing Address 1602 Hampton Oaks Bnd

City State Zip Code
 Marietta GA 30066-4451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : PR7883973260

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Donna McCarthy

Mailing Address 34 Warren St

City State Zip Code
 Wellfleet MA 02667-8527

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

West Division President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : PR7883993260

Amount of Each Receipt this Period

230.76

P/R Deduction (\$230.76 Monthly)

Full Name (Last, First, Middle Initial)

C. Liam Walsh

Mailing Address 5809 Chatham Ln

City State Zip Code
 The Colony TX 75056-7109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : PR7884003260

Amount of Each Receipt this Period

134.00

P/R Deduction (\$134.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

664.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Kim Sonnen

Mailing Address 240 S Madison St

City

Denver

State

CO

Zip Code

80209-3010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP Marketing & Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : PR7884013260

Amount of Each Receipt this Period

260.00

P/R Deduction (\$260.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Steven P Covino

Mailing Address 6 Williams Street

City

Waltham

State

MA

Zip Code

02453-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : PR7884953260

Amount of Each Receipt this Period

192.32

P/R Deduction (\$192.32 Monthly)

Full Name (Last, First, Middle Initial)

C. Carol A Ernst

Mailing Address 22370 N 64th Ave

City

Glendale

State

AZ

Zip Code

85310-4259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : PR7885003260

Amount of Each Receipt this Period

76.92

P/R Deduction (\$76.92 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

529.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. James Freedman

Mailing Address 269 Rolling Meadow

City State Zip Code
 Holliston MA 01746-1521

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Leadership & Prof Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2012

Transaction ID : PR7885043260

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Matthew D KinserMailing Address 750 Old Hickory Blvd Suite 230
Suite 230

City State Zip Code
 Brentwood TN 37027-4528

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2012

Transaction ID : PR7885153260

Amount of Each Receipt this Period

76.92

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

C. Mark R Fawcett

Mailing Address 100 Franklin Street

City State Zip Code
 Arlington MA 02474-3214

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2012

Transaction ID : PR7885583260

Amount of Each Receipt this Period

76.00

P/R Deduction (\$76.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

232.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Balaji Gandhi

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Gov't & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : PR7885813260

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Kathleen Stearns

Mailing Address 26 Hillside Rd

City

Plainville

State

MA

Zip Code

02762-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr. Insurance Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : PR7886033260

Amount of Each Receipt this Period

16.50

P/R Deduction (\$16.50 Monthly)

Full Name (Last, First, Middle Initial)

C. Sandra Geraci

Mailing Address 262 Berenger Walk

City

West Palm Beach

State

FL

Zip Code

33414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : PR7886293260

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

196.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 21

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Terry L Ketchersid

Mailing Address 920 Winter Street

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2012

Transaction ID : PR7979763260

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Catherine Dubinsky

Mailing Address 920 Winter Street

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Operations Integrity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2012

Transaction ID : PR8131083260

Amount of Each Receipt this Period

76.92

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

C. William Fink

Mailing Address 32 Hartwell Ave

City State Zip Code
 Lexington MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP, ITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2012

Transaction ID : PR8306753260

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

276.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Charles Michael Lynch

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : PR8584883260

Amount of Each Receipt this Period

384.60

P/R Deduction (\$384.60 Monthly)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

384.60

TOTAL This Period (last page this line number only)..... ►

14101.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Nelson 2012

Mailing Address 420 C Street NE

City

Washington

State

DC

Zip Code

20002-5818

FEC ID number of contributing
federal political committee.

C

C00432401

Name of Employer

Occupation

Receipt For: 2012

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2012

Transaction ID : 6247518

Amount of Each Receipt this Period

4000.00

Refund from Candidate not seeking re-election

Full Name (Last, First, Middle Initial)

B. Snowe for Senate

Mailing Address PO Box 2012

City

Portland

State

ME

Zip Code

04104

FEC ID number of contributing
federal political committee.

C

C00291955

Name of Employer

Occupation

Receipt For: 2012

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : 6292433

Amount of Each Receipt this Period

1000.00

Refund Not Seeking ReElection

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

5000.00

TOTAL This Period (last page this line number only)..... ►

5000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Bob Corker For Senate 2012

Mailing Address PO Box 848

City	State	Zip Code
Chattanooga	TN	37401

Purpose of Disbursement
Direct Contribution

011

Category/
Type

Candidate Name

Sen. Robert Corker

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2012

Transaction ID : 6274534

Amount of Each Disbursement this Period

1000.00

Direct Contribution

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

1000.00